

| POSITION                  | INITIALS | TO NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | BW       |        | 4-12-01  |
| O.I.P.E. CLASSIFIER       |          | 49     | 5/7/01   |
| FORMALITY REVIEW          | C.V.     | 503    | 05/15/01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Date     |
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| 1     | 9/1/97   |
| 2     | 11/13/00 |
| 3     | 11/19/03 |
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| Claim | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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Best Available Copy